Case 17-37935 Doc 1 Filed 12/22/17 Entered 12/22/17 14:39:34 Desc Main Document Page 1 of 60

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your | Teresa First name L. Middle name Smith | First name Middle name | |
| | meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you havused in the last 8 years | e | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2293 | | |

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Case number (if known) Debtor 1 Teresa L. Smith

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|---|--|--|--|
| ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 807 B4 Horseshoe Drive Joliet, IL 60435 Number, Street, City, State & ZIP Code | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code | | |
| Will County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| Check one: ■ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | Business name(s) Business name(s) BINS BOT B4 Horseshoe Drive Joliet, IL 60435 Number, Street, City, State & ZIP Code Will County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | | |

Document Page 3 of 60 Case number (if known) Debtor 1 Teresa L. Smith Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. **Northern District of** When 1/23/09 Case number 09 B District Illinois When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Document Page 4 of 60 Case number (if known) Debtor 1 Teresa L. Smith Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes.

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Teresa L. Smith

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Teresa L. Smith | | Document | Page 6 of 60 Ca | se number (if known) | | |
|------|--|-----------------------|--|--|---------------------------------|---|--|
| Pari | | ions for Re | eporting Purposes | | | | |
| | What kind of debts do you have? | 16a. | Are your debts primarily consum individual primarily for a personal, f | | | J.S.C. § 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily business money for a business or investmen | | • | | |
| | | | ☐ No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you owe that | at are not consumer debts of | or business debts | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go | to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do you are paid that funds will be available | | | luded and administrative expense | |
| | administrative expenses are paid that funds will | | ■ No | | | | |
| | be available for distribution to unsecured creditors? | |] Yes | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | □ 2 | 5,001-50,000 | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | | 5 0,001-100,000 | |
| | | ☐ 100-19 ☐ 200-99 | | □ 10,001-25,000 | ЦN | More than100,000 | |
| 19. | How much do you estimate your assets to | □ \$0 - \$5 | | □ \$1,000,001 - \$10 millio | | 500,000,001 - \$1 billion | |
| | be worth? | | 01 - \$100,000 001 - \$500,000 | □ \$10,000,001 - \$50 mill □ \$50,000,001 - \$100 mi | | 1,000,000,001 - \$10 billion 10,000,000,001 - \$50 billion | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 m | | ☐ More than \$50 billion | |
| 20. | How much do you | □ \$0 - \$5 | 50,000 | □ \$1,000,001 - \$10 millio | n 🗆 \$ | 500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | | 01 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | _ ` | \$1,000,000,001 - \$10 billion | |
| | | | 001 - \$500,000 001 - \$1 million | | | \$10,000,000,001 - \$50 billion More than \$50 billion | |
| _ | | ш ф500,0 | 701 - \$1 HIIIIOH | | | | |
| Part | 17: Sign Below | | | | | | |
| For | you | I have exa | amined this petition, and I declare u | nder penalty of perjury that | the information prov | vided is true and correct. | |
| | | | chosen to file under Chapter 7, I am ates Code. I understand the relief as | | | | |
| | | If no attor | ney represents me and I did not pay t, I have obtained and read the notic | or agree to pay someone to required by 11 U.S.C. § 3 | who is not an attorn 342(b). | ey to help me fill out this | |
| | | I request | relief in accordance with the chapte | r of title 11, United States 0 | Code, specified in thi | is petition. | |
| | | bankrupto and 3571 | | | | | |
| | | /s/ Teres | sa L. Smith | Signature | e of Debtor 2 | | |
| | | | of Debtor 1 | Oignature | | | |
| | | Executed | on <u>December 22, 2017</u> MM / DD / YYYY | Executed | on MM / DD / YY | VV | |
| | | | וזוז / טט / וווווו | | IVIIVI / UU / Y Y | 1.1 | |

Debtor 1 Teresa L. Smith Document Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Patrick A. Meszaros | Date | December 22, 2017 |
|--|---------------|-------------------|
| Signature of Attorney for Debtor | _ | MM / DD / YYYY |
| Patrick A. Meszaros 6239538 | | |
| Printed name | | |
| Law Office of Patrick Meszaros | | |
| Firm name | | |
| 1100 W. Jefferson | | |
| Joliet, IL 60435 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone | Email address | |
| 6239538 | | |
| Bar number & State | | |

| | | Docume | ent Page 8 of 60 | |
|---------------------|--------------------------|-------------------|------------------|---------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Teresa L. Smith | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 128,500.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 28,794.51 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 157,294.51 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 121,380.26 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 67,796.40 |
| | Your total liabilities | \$ | 189,176.66 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,200.99 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,821.44 |
| Pai | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ | 500.00 |
|----|--|-----|--------|
| | 122A-1 Line 11, ON, 1 Olin 122B Line 11, ON, 1 Olin 122O-1 Line 14. | i — | |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clair | n |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | C | ase 17-37935 | Doc 1 | Filed 12/22/1 ⁻ Document | 7 Entered 12/22/1 | L7 14:39:34 | Desc | Main |
|--------------------------|--|--|---|---|--|--|------------|--|
| Fill i | n this infor | mation to identify y | our case and th | | T Aut. TO OI OO | | | |
| Debte | or 1 | Teresa L. Smi | | e Name | Last Name | | | |
| Debte | or 2 | Thorrame | Middle | , realite | Last Hamo | | | |
| (Spous | se, if filing) | First Name | Middle | e Name | Last Name | | | |
| Unite | ed States Ba | ankruptcy Court for th | ne: NORTHER | N DISTRICT OF ILL | INOIS | | | |
| Case | e number | | | | _ | | | Check if this is an amended filing |
| _ | | orm 106A/B | | | | | | |
| | | le A/B: Pro | | | f an asset fits in more than one | | | 12/15 |
| hink i nform Inswe | it fits best. In ation. If mo er every que | Be as complete and ac re space is needed, att stion. | curate as possibl tach a separate sl | e. If two married peop heet to this form. On | ole are filing together, both are the top of any additional pages Own or Have an Interest In | equally responsible | for supp | lying correct |
| Do | vou own or | have any logal or equi | table interest in a | uny rosidonco, buildin | g, land, or similar property? | | | |
| _ | - | | table interest in a | iny residence, buildin | g, land, or similar property: | | | |
| _ | No. Go to Pa | | | | | | | |
| • | Yes. Where | is the property? | | | | | | |
| | | | | | | | | |
| 1.1 | | | | What is the prope | rty? Check all that apply | | | |
| | 807 B4 H | orseshoe Drive | | ☐ Single-famil | | Do not deduct sec | ured claim | s or exemptions. Put |
| _ | Street address | , if available, or other descri | ption | ■ Duplex or m | ulti-unit building | the amount of any | secured c | laims on Schedule D: Secured by Property. |
| | | | | Condominiu | m or cooperative | Creditors vino ria | o Olalinis | occured by 1 Topolly. |
| | | | | | ed or mobile home | | | |
| | Joliet | IL | 60435-0000 | ☐ Land | | Current value of t entire property? | | Current value of the portion you own? |
| _ | City | State | ZIP Code | Investment | property | \$128,500 | 0.00 | \$128,500.00 |
| | | | | ☐ Timeshare ☐ Other | | | | r ownership interest |
| | | | | | est in the property? Check one | a life estate), if kr | | cy by the entireties, or |
| | | | | Debtor 1 on | | Fee Simple | | |
| _ | Will | | | Debtor 2 on | ly | | | |
| | County | | | | d Debtor 2 only | | | unity property |
| | | | | | of the debtors and another you wish to add about this ite ation number: | m, such as local | 3) | |
| | | | | | based on Comparable S | Sale pending | | |
| | | | | | | - <u>.</u> | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$128,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 17-37935 Doc 1 Filed 12/22/17 Entered 12/22/17 14:39:34 Desc Main Page 11 of 60 Case number (if known) Document Debtor 1 Teresa L. Smith 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevy Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: HHR Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2011 Year: Debtor 2 only Current value of the Current value of the 110000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$5,000.00 \$5,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Focus** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2016 Year: Debtor 2 only Current value of the Current value of the 28000 Approximate mileage: ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$20,000.00 \$20,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$25,000.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$2,000.00 Furniture

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Teresa L. Smith 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

□ No

Institution name: ■ Yes.....

> Chase \$39.00 Checking 17.1.

> Nu Mark CU \$4.51 17.2. Checking

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Case number (if known)

Document Debtor 1 Teresa L. Smith

| | | 17.3. | Savings | Numark CU | | \$1.00 |
|----|--|------------|-------------------------|--|--|--|
| 18 | Bonds, mutual funds, o Examples: Bond funds, i | | | s brokerage firms, money ma | arket accounts | |
| | ■ No □ Yes | | Institution or issu | er name: | | |
| 19 | Non-publicly traded sto joint venture ■ No | ck and | interests in inco | rporated and unincorpora | ated businesses, including an interes | st in an LLC, partnership, and |
| | Yes. Give specific info | | about themne of entity: | | % of ownership: | |
| 20 | Negotiable instruments i | nclude p | ersonal checks, o | egotiable and non-negotial cashiers' checks, promissor transfer to someone by sign | ry notes, and money orders. | |
| | ☐ Yes. Give specific infor | | about them uer name: | | | |
| 21 | Retirement or pension a Examples: Interests in IF No | | |), 403(b), thrift savings acco | ounts, or other pension or profit-sharing | plans |
| | ☐ Yes. List each account | • | ely. of account: | Institution name: | | |
| 22 | | deposit | s you have made | | service or use from a company las, water), telecommunications compa | nies, or others |
| | Yes | | | Institution name of | or individual: | |
| 23 | . Annuities (A contract for | a period | dic payment of mo | oney to you, either for life or | r for a number of years) | |
| | ■ No □ YesIssi | uer nam | e and description | | | |
| 24 | 26 U.S.C. §§ 530(b)(1), 52 | | | a qualified ABLE program, | , or under a qualified state tuition pro | ogram. |
| | ■ No □ Yes Ins | titution r | name and descrip | tion. Separately file the reco | ords of any interests.11 U.S.C. § 521(c) |): |
| 25 | Trusts, equitable or futu | ıre inte | ests in property | (other than anything liste | ed in line 1), and rights or powers ex | ercisable for your benefit |
| | ■ Yes. Give specific info | rmation | about them | | | |
| | | [| Social Securit | y Award Application Pe | ending | Unknown |
| 26 | | ain name | es, websites, prod | and other intellectual pro ceeds from royalties and lice | | |
| 27 | Licenses, franchises, at Examples: Building perm | | | | ings, liquor licenses, professional licens | ses |
| | ☐ Yes. Give specific info | rmation | about them | | | |
| M | oney or property owed to | you? | | | | Current value of the portion you own? Do not deduct secured |

Schedule A/B: Property Official Form 106A/B

page 4

claims or exemptions.

Document Page 14 of 60 Case number (if known) Debtor 1 Teresa L. Smith 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Anticipated tax refund 2017 \$1,200.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,294,51 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
Official Form 106A/B

Case 17-37935

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Schedule A/B: Property

Case 17-37935 Doc 1 Filed 12/22/17 Entered 12/22/17 14:39:34 Desc Main Page 15 of 60 Case number (if known) Document Debtor 1 Teresa L. Smith ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$128,500.00 Part 2: Total vehicles, line 5 \$25,000.00 Part 3: Total personal and household items, line 15 \$2,500.00 Part 4: Total financial assets, line 36 58. \$1,294.51 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$28,794.51 Copy personal property total \$28,794.51 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$157,294.51

Official Form 106A/B Schedule A/B: Property page 6

| | | 1700.111116. | | |
|---|-------------------------|-------------------|-------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Teresa L. Smith | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | , | | Specific laws that allow exemption | |
|--|---|---|---|------------------------------------|--|
| | Copy the value from Check only one box for each exemption. Schedule A/B | | ck only one box for each exemption. | | |
| 807 B4 Horseshoe Drive Joliet, IL 60435 Will County | \$128,500.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| Duplex Value based on Comparable Sale pending Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2011 Chevy HHR 110000 miles Line from Schedule A/B: 3.1 | \$5,000.00 | | \$1,992.57 | 735 ILCS 5/12-1001(c) | |
| Line from Scriedule A/B. 3.1 | | 100% of fair market value, up to any applicable statutory limit | | | |
| 2016 Ford Focus 28000 miles | \$20,000.00 | | \$1,417.48 | 735 ILCS 5/12-1001(b) | |
| Ellie Holli Gerieddie FAB. G.E | | | 100% of fair market value, up to any applicable statutory limit | | |
| Furniture Line from Schedule A/B: 6.1 | \$2,000.00 | | \$1,582.52 | 735 ILCS 5/12-1001(b) | |
| Ellie Holli Genedale A.B. G.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Clothing Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) | |
| Line nom <i>Schedule PVD</i> . 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Entered 12/22/17 14:39:34 Document Page 17 of 60 Debtor 1 Teresa L. Smith Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Social Security Award Application** 735 ILCS 5/12-1001(g)(1) Unknown 100% **Pending** Line from Schedule A/B: 25.1 100% of fair market value, up to any applicable statutory limit Federal: Anticipated tax refund 2017 735 ILCS 5/12-1001(b) \$1,200.00 \$1,000.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

| 3. | Are you claiming a | homestead exemption | of more than \$160,375? |
|----|--------------------|---------------------|-------------------------|
|----|--------------------|---------------------|-------------------------|

Doc 1

Case 17-37935

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 12/22/17

- No
- Yes

Desc Main

| | | Document | Page 18 | of 60 | | |
|---|--------------------------|--|---------------------|----------------------------------|--------------------------|----------------------|
| Fill in this informati | on to identify you | r case: | | | | |
| Debtor 1 | Teresa L. Smith | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankru | uptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | | |
| _ | | | | | | |
| Case number | | | | | □ Chock | if this is an |
| (ii iaiomi) | | | | | _ | led filing |
| | | | | | | .oug |
| Official Form 1 | 06D | | | | | |
| Schedule D | Creditors | Who Have Claims S | Secured | by Property | v | 12/15 |
| ochedate D. | Ol Cultors | Wile Have claims | Jecui cu | by Hopert | , | 12/10 |
| | | f two married people are filing togethe out, number the entries, and attach it t | | | | |
| number (if known). | uitional Fage, illi it c | out, number the entries, and attach it t | o uns ioini. On | the top of any addition | iai pages, write your na | ille allu case |
| 1. Do any creditors hav | e claims secured by | your property? | | | | |
| □ No. Check this | s box and submit th | nis form to the court with your other: | schedules. Yo | u have nothing else to | o report on this form. | |
| Yes Fill in all | of the information b | relow | | - | | |
| | ecured Claims | 50.0W. | | | | |
| • | | | | Column A | Column B | Column C |
| | | nore than one secured claim, list the cred a particular claim, list the other creditors | | Amount of claim | Value of collateral | Unsecured |
| | | cal order according to the creditor's name | | Do not deduct the | that supports this | portion |
| 2.1 Ally Financia | nI | Describe the property that secures the | he claim: | value of collateral. \$18,582.52 | claim \$20,000.00 | If any \$0.00 |
| Creditor's Name | <u>u</u> | 2016 Ford Focus 28000 miles | | ψ10,002.02 | Ψ20,000.00 | Ψ0.00 |
| | | 201010101010000200001111100 | | | | |
| Bankruptcy I | Department | As of the data year file the plain is a | 21 1 11 11 1 | | | |
| P.O. Box 130 | | As of the date you file, the claim is: (apply. | Sheck all that | | | |
| Saint Paul, N | IN 55113 | ☐ Contingent | | | | |
| Number, Street, City | , State & Zip Code | Unliquidated | | | | |
| Who ower the debt? | Oh a ale a a a | Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as n car loan) | nortgage or secu | ired | | |
| Debtor 2 only | 0 1 | _ | 1 1 - P X | | | |
| ☐ Debtor 1 and Debtor ☐ At least one of the d | • | ☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit | nanic's lien) | | | |
| ☐ Check if this claim | | _ | Purchase M | loney Security | | |
| community debt | relates to a | Other (including a right to offset) | | ionoy occurry | | |
| Data dahta in a | | Land A dimital of an annual mount | FF77 | | | |
| Date debt was incurre | a | Last 4 digits of account numb | er <u>5577</u> | | | |
| Ohana Hama | Mantagas | Describe the manner to that account to | ha alalas | ¢00 700 24 | £400 E00 00 | \$0.00 |
| 2.2 Chase Home | Mortgage | Describe the property that secures the | | \$99,790.31 | \$128,500.00 | \$0.00 |
| Oreditor 3 Name | | 807 B4 Horseshoe Drive Joli 60435 Will County | et, IL | | | |
| | | Duplex Value based on Com | parable | | | |
| | | Sale pending | | | | |
| PO Box 7842 | 20 | As of the date you file, the claim is: 0 apply. | Check all that | | | |
| Phoenix, AZ | 85062 | ☐ Contingent | | | | |
| Number, Street, City | , State & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as n | nortgage or secu | ured | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debtor | | Statutory lien (such as tax lien, med | hanic's lien) | | | |
| At least one of the d | | ☐ Judgment lien from a lawsuit | | | | |
| Check if this claim community debt | relates to a | Other (including a right to offset) | Mortgage | | | |
| community debt | | | | | | |

Official Form 106D

Date debt was incurred

Last 4 digits of account number 0984

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| Debtor 1 Teresa L. Smith | | Case number (if know) | | | | |
|--|--|-----------------------|------------|--------|--|--|
| First Name Middle N | ame Last Name | _ | | | | |
| | | | | | | |
| | | | | | | |
| 2.3 NuMark Credit Union | Describe the property that secures the claim: | \$3,007.43 | \$5,000.00 | \$0.00 | | |
| Creditor's Name | 2011 Chevy HHR 110000 miles | | | | | |
| 2380 Caton Farm Road Crest Hill, IL 60403 | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Contingent | | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or | secured | | | | |
| Debtor 2 only | car loan) | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien |) | | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Purchas | se Money Security | | | | |
| Date debt was incurred | Last 4 digits of account numberx80 | 07 | | | | |
| | | | | | | |
| Add the dollar value of your entries in C | olumn A on this page. Write that number here: | \$121,380.26 | <u>;</u> | | | |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages. | \$121,380.26 | ;] | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case | 11-31933 L | | Document | Page 2 | 0 of 60 | 9.54 De. | sc main |
|-------------|--|---------------------------------------|--------------------|--------------------------|-------------------|---|-------------------|---|
| Fill in t | his informati | on to identify your | | | | | | |
| Debtor | 1 . | Teresa L. Smith | | | | | | |
| | | First Name | Middle Na | ime | Last Name | | | |
| Debtor | _ | | | | | | | |
| (Spouse if | f, filing) F | First Name | Middle Na | ıme | Last Name | | | |
| United 9 | States Bankru | ptcy Court for the: | NORTHERN | I DISTRICT OF ILL | INOIS | | | |
| Casa ni | umbor | | | | | | | |
| (if known) | | | | - | | | | Check if this is an |
| | | | | | | | _ | amended filing |
| | | | | | | | | |
| | al Form 1 | | | | | | | _ |
| Sche | dule E/F | : Creditors W | ho Have | Unsecured | Claims | | | 12/15 |
| left. Attac | ch the Continu d case number — | ation Page to this pag (if known). | e. If you have r | o information to rep | | the Part you need, fill it out do not file that Part. On the | | |
| Part 1: | | Your PRIORITY Un | | | | | | |
| _ | • | ave priority unsecure | d claims agains | it you? | | | | |
| | No. Go to Part 2 | !. | | | | | | |
| | | | | | | | | |
| Part 2: | | Your NONPRIORIT | | | | | | |
| | - | ave nonpriority unsec | _ | | | | | |
| Цι | No. You have no | othing to report in this p | art. Submit this f | orm to the court with y | your other sche | edules. | | |
| | Yes. | | | | | | | |
| unse | ecured claim, lis n one creditor ho | t the creditor separately | y for each claim. | For each claim listed, | , identify what t | holds each claim. If a cred type of claim it is. Do not list of three nonpriority unsecured | claims already in | cluded in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 | Americolle | ct Inc | | Last 4 digits of acco | ount number | 6788 | | \$208.00 |
| | Nonpriority Cre | | | _ | | | | , |
| | 1851 S Alv | | | When was the debt | incurred? | Opened 8/01/16 | | _ |
| - | Manitowoo Number Street | City State Zlp Code | | As of the date you f | ile, the claim i | is: Check all that apply | | |
| | | the debt? Check one. | | • | , | | | |
| | ■ Debtor 1 or | nly | | ☐ Contingent | | | | |
| | Debtor 2 or | • | | ☐ Unliquidated | | | | |
| | | nd Debtor 2 only | | Disputed | | | | |
| | | e of the debtors and and | other | Type of NONPRIOR | ITY unsecured | d claim: | | |
| | | is claim is for a com | | ☐ Student loans | | | | |
| | debt | | • | | | ration agreement or divorce | that you did not | |
| | _ | ubject to offset? | | report as priority clain | | | | |
| | No | | | | | g plans, and other similar de | | |
| | ☐ Yes | | | Other. Specify | Collection A | Attorney Community | Memorial | |

Document Page 21 of 60 Debtor 1 Teresa L. Smith Case number (if know) 4.2 \$5,077.00 **Barclays Bank Delaware** Last 4 digits of account number 9162 Nonpriority Creditor's Name Opened 05/10 Last Active P.o. Box 8803 When was the debt incurred? 7/25/16 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.3 Bbv/cbna 4392 Last 4 digits of account number \$2,335.00 Nonpriority Creditor's Name Opened 10/12 Last Active Po Box 6497 When was the debt incurred? 1/24/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.4 Blitt & Gaines, P.C. Last 4 digits of account number 4065 \$2.116.00 Nonpriority Creditor's Name **Attorney for Plaintiff** When was the debt incurred? 661 Glenn Avenue Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Judgment Atty for Capital One

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Debtor 1 Teresa L. Smith Case number (if know) 4.5 \$399.00 Cap1/hlzbq Last 4 digits of account number 4170 Nonpriority Creditor's Name Opened 08/11 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 12/10/17 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.6 Capital Management Services, LP Last 4 digits of account number 3356 \$5,077.20 Nonpriority Creditor's Name 698 1/2 South Ogden St. When was the debt incurred? Buffalo, NY 14206-2317 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection for Barclays Bank 4.7 **Capital One** \$2,116.00 Last 4 digits of account number 2613 Nonpriority Creditor's Name Opened 05/09 Last Active Po Box 26625 When was the debt incurred? 7/23/16 Richmond, VA 23261 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Teresa L. Smith Case number (if know) 4.8 \$1,384.00 Capital One Last 4 digits of account number 2747 Nonpriority Creditor's Name Opened 02/12 Last Active 15000 Capital One Dr When was the debt incurred? 8/03/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 6870 Citi Last 4 digits of account number \$1,249.00 Nonpriority Creditor's Name Opened 03/16 Last Active Po Box 6241 When was the debt incurred? 9/01/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 Client Services, Inc 0610,6870 \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 1503 Saint Peters, MO 63376-0027 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Bank and Capital One

Collection for Department Stores National

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Debtor 1 Teresa L. Smith Case number (if know) 4.1 Collection Bureau Of A 7332 \$346.00 Last 4 digits of account number Nonpriority Creditor's Name 25954 Eden Landing Road When was the debt incurred? **Opened 08/17** Hayward, CA 94541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Ds Services Of America** ☐ Yes Other. Specify multiple Comenity Bank - All Bk Notices \$3,000.00 2 Last 4 digits of account number accts Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 182125 Columbus, OH 43218-2125 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Cards 4.1 \$519.00 Comenity Bank/torrid 4884 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/16 Last Active Po Box 182789 10/19/16 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

Official Form 106 E/F

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Case number (if know) Debtor 1 Teresa L. Smith 4.1 \$882.00 Comenitybk/victoriasec 7440 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 11/15 Last Active Po Box 182789 When was the debt incurred? 9/10/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Credit Control, LLC 9878 \$1,885.32 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 488 5757 Phantom Dr., Ste. 330 Hazelwood, MO 63042 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Capital One ☐ Yes 4.1 **Discover Fin Sycs LIc** \$6.649.00 3573 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 10/15 Last Active Po Box 15316 When was the debt incurred? 1/01/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

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Document Page 26 of 60 Debtor 1 Teresa L. Smith Case number (if know) 4.1 \$100.00 Dr. R.K. Natesh medical Last 4 digits of account number Nonpriority Creditor's Name 1100 Essington Rd, Suite 6 When was the debt incurred? Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Dsnb Macys** 0610 \$1,703.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 07/13 Last Active Po Box 8218 When was the debt incurred? 10/19/16 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 1419 \$94.24 **Dupage Medical Group** Last 4 digits of account number Nonpriority Creditor's Name 15921 Collections Center Drive When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify medical

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Case number (if know)

Debtor 1 Teresa L. Smith 4.2 **Enhanced Recovery Co L** 1501 \$226.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 8014 Bayberry Rd When was the debt incurred? **Opened 09/17** Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney At T U-Verse ☐ Yes 4.2 **ERC** 1501 \$225.79 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 23870 Jacksonville, FL 32241-3870 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for AT&T ☐ Yes 4.2 **Global Credit & Collection** 8275 \$1.589.85 Last 4 digits of account number Nonpriority Creditor's Name 5440 N Cumberland Avenue When was the debt incurred? Ste 300 Chicago, IL 60656 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Synchrony Bank ☐ Yes

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Case number (if know) Debtor 1 Teresa L. Smith 4.2 \$500.00 **Kohl's Collection Department** 7802 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 3084 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 Kohls/capone 9878 \$1,885.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/13 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 7/23/16 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 **Merchants Credit Guide** \$195.00 0269 Last 4 digits of account number 5 Nonpriority Creditor's Name 223 W Jackson Blvd Ste 7 When was the debt incurred? **Opened 04/17** Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Dupage Medical Group

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Case number (if know) Debtor 1 Teresa L. Smith multiple 42 Meridian Medical Associates, SC \$500.00 6 Last 4 digits of account number accts Nonpriority Creditor's Name Joliet Medical Building When was the debt incurred? 2100 Glenwood Ave. Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify meidcal ☐ Yes 4.2 7201 Meyer & Njus, P.A. Unknown Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 33 N Dearborn Street Ste 1301 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for Synchrony Bank ☐ Yes 4.2 **Monterey Collection Sv** 5731 \$4,274.00 Last 4 digits of account number Nonpriority Creditor's Name 4095 Avenida De La Playa When was the debt incurred? **Opened 11/16** Oceanside, CA 92056 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

8

■ Other. Specify Collection Attorney Career Step

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☐ Yes

■ Other. Specify Mecial Bill

Document Page 31 of 60 Case number (if know) Debtor 1 Teresa L. Smith 4.3 \$100.00 Sam Club 5660 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 981400 When was the debt incurred? El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card 4.3 Syncb/jcp 1437 \$1,589.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/13 Last Active Po Box 965007 When was the debt incurred? 11/15/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 Syncb/sams Club \$708.00 1977 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/13 Last Active Po Box 965005 When was the debt incurred? 7/23/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Charge Account

Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Teresa L. Smith 4.3 Syncb/walmart 4829 \$1,598.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 11/12 Last Active Po Box 965024 When was the debt incurred? 7/12/16 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes SYNCHRONY Bank - ALL multiple 4.3 \$3,000.00 6 **BANKRUPTCY** Last 4 digits of account number accts Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy PO Box 965061 Orlando, FL 32896-5061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify credit cards 4.3 Td Bank Usa/targetcred 6773 \$1,335.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/15 Last Active Po Box 673 When was the debt incurred? 8/03/16 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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| Debloi | i eresa L. | Smith | | Case n | umber (if know) | | | | |
|--------------------|--------------------------------------|------------------------------------|--|----------------|-------------------------------------|----------------------------|--|--|--|
| <u> </u> | Torrid | | Last 4 digits of account numbe | r 4884 | | \$100.00 | | | |
| | P.O. Box 65 San Antonio | | When was the debt incurred? | | | _ | | | |
| _ | Number Street | City State Zlp Code | As of the date you file, the clair | n is: Check | all that apply | | | | |
| | ■ Debtor 1 onl | y | ☐ Contingent | | | | | | |
| | Debtor 2 onl | у | ☐ Unliquidated | | | | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecu | red claim: | | | | | |
| | ☐ Check if thi | s claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim su | | Obligations arising out of a se report as priority claims | paration ag | reement or divorce that you did not | : | | | |
| | ■ No | | Debts to pension or profit-sha | ring plans, | and other similar debts | | | | |
| | ☐ Yes | | Other. Specify credit car | d | | _ | | | |
| 4.3 | WalMart | | Last 4 digits of account numbe | r 4829 | | \$500.00 | | | |
| | PO Box 530 | 927 | When was the debt incurred? | | | _ | | | |
| | Atlanta, GA | . 30353 City State Zlp Code | As of the date you file, the clair | n is: Check | all that apply | | | | |
| | | the debt? Check one. | , o auto , ou, c | | t all that apply | | | | |
| | ■ Debtor 1 onl | V | ☐ Contingent | | | | | | |
| | Debtor 2 onl | | | ☐ Unliquidated | | | | | |
| | Debtor 1 and | • | ☐ Disputed | | | | | | |
| | _ | of the debtors and another | Type of NONPRIORITY unsecui | red claim: | | | | | |
| | | s claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim su | • | Obligations arising out of a se report as priority claims | paration ag | reement or divorce that you did not | | | | |
| | ■ No | | Debts to pension or profit-sha | ring plans, a | and other similar debts | | | | |
| | ☐ Yes | | Other. Specify Credit Ca | rd | | _ | | | |
| Part 3: | List Others | s to Be Notified About a Deb | ot That You Already Listed | | | | | | |
| is tryin have n | ng to collect fro nore than one c | m you for a debt you owe to so | bout your bankruptcy, for a debt tha meone else, list the original creditor you listed in Parts 1 or 2, list the ad r submit this page. | in Parts 1 | or 2, then list the collection agen | cy here. Similarly, if you | | | |
| | nd Address | | On which entry in Part 1 or Part 2 did yo | | O . | | | | |
| | HRONY Ban ankruptcy N | | | | Creditors with Priority Unsecured C | | | | |
| | x 965061 | 1011000 | | ■ Part 2: 0 | Creditors with Nonpriority Unsecure | d Claims | | | |
| Orland | lo, FL 32896 | | Last 4 digits of account number | | | | | | |
| Part 4: | Add the Ar | mounts for Each Type of Un | secured Claim | | | | | | |
| | he amounts of f unsecured cla | | ms. This information is for statistica | l reporting | purposes only. 28 U.S.C. §159. A | add the amounts for each | | | |
| | | | | | Total Claim | | | | |
| | 6a. otal aims | Domestic support obligations | | 6a. | \$ | <u>0</u> | | | |
| from Pa | | Taxes and certain other debts | you owe the government | 6b. | \$ 0.0 | 0 | | | |
| | 6c. | | njury while you were intoxicated | 6c. | \$ 0.0 | | | | |
| | 6d. | Other. Add all other priority unso | ecured claims. Write that amount here. | 6d. | \$ | <u>0</u> | | | |

Official Form 106 E/F

6e. **Total Priority.** Add lines 6a through 6d.

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Debtor 1 Teresa L. Smith

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 67,796.40 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 67,796.40 |

| | | <u> </u> | III PAUE 33 ULOU | 1 | | |
|---|-----------------|-------------------|------------------|---|--|--|
| Fill in this information to identify your case: | | | | | | |
| Debtor 1 | Teresa L. Smith | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | | |
| | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | | | | | State what the contract or lease is for |
|--|--------|--------|-------|----------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

| | | Docume | ent Page 36 o | of 60 |
|-------------------------------|---|-------------------------------|---------------------------|---|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | Teresa L. Smith | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filir | ng) First Name | Middle Name | Last Name | |
| (Spouse II, IIIII | ng) i iist ivame | Wildlie Name | Last Name | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numb | ber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| O((; - ; -) | I - 40011 | | | |
| | I Form 106H | | | |
| Sched | lule H: Your Cod | ebtors | | 12/15 |
| | | | | s complete and accurate as possible. If two married |
| | | | | ion. If more space is needed, copy the Additional Page o this page. On the top of any Additional Pages, write |
| | and case number (if known | | | o this page. On the top of any Additional Fages, write |
| 1 Do | you have any codebtors? (If | you are filing a joint ages | do not list sither angues | as a codebtor |
| 1. 00 | you have any codebiors? (II | you are ming a joint case, | do not list either spouse | as a codeptor. |
| ■ No | | | | |
| ☐ Yes | 3 | | | |
| 2 Witi | hin the last 8 years, have you | Llived in a community n | conorty state or territor | y? (Community property states and territories include |
| | ia, California, Idaho, Louisiana | | | |
| | | | | , |
| ■ No. | Go to line 3. | | | |
| ☐ Yes | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | |
| | | | | |
| | | | | if your spouse is filing with you. List the person show |
| | | | | sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to f |
| | olumn 2. | 11 01111 100E/1 /; 01 0ched | ale o (omelai i omi io | ooj. Ose deficació b, deficació Err, or deficació d'or |
| 4 | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | IP Code | | Check all schedules that apply: |
| | | | | _ |
| 3.1 | Name | | | Schedule D, line |
| | INAITIC | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | 04-4- | 71D O- 1- | _ |
| | City | State | ZIP Code | |
| | | | | _ |
| 3.2 | Nome | | | Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | 0 | 715.0 | _ |
| | City | State | ZIP Code | |

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| Eill | in this information to | identify your c | oso. | | | | | | | | |
|--------------------|--|---------------------------------|---|--|-------------------------------|------------------|--------------------|------------|-------------------------|-------------------------------|-----------------|
| | | Teresa L. Sr | | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | | | | | | |
| Uni | ted States Bankruptc | y Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | | | | | | |
| | se number | | | | | | □ A | | ed filing ent showi | ng postpetition | |
| 0 | fficial Form | 1061 | | | | | | IM / DD/ \ | | ronowing date. | |
| S | chedule I: Y | our Inc | ome | | | | ıv | IIVI / DD/ | | | 12/15 |
| sup spo atta | plying correct inforr use. If you are sepa ch a separate sheet | nation. If you rated and you | sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi | ng jointly, and y ith you, do not i | our spouse i nclude infori | is livi matio | ng with n about | you, incl | ude infor ouse. If n | mation about nore space is | your needed, |
| 1. | Fill in your employ information. | ment | | Debtor 1 | | | | Debtor : | 2 or non- | filing spouse | |
| | If you have more th | an one job, | F | ■ Employed | | | | ☐ Empl | | | |
| | attach a separate p information about a | · · | Employment status | ☐ Not employ | red | | | □ Not e | mployed | | |
| | employers. | | Occupation | Pharmacy to | ech | | | | | | |
| | Include part-time, s self-employed work | | Employer's name | Healthcare \$ | Support Sta | affin | 3 | | | | |
| | Occupation may incor homemaker, if it | | Employer's address | 101 Southha Ste 100 Maitland, FL | | | | | | | |
| | | | How long employed the | here? 5 w | eeks | | | _ | | | |
| Par | t 2: Give Deta | ils About Mor | thly Income | | | | | | | | |
| | mate monthly incon use unless you are se | | ate you file this form. If y | you have nothing | to report for | any li | ne, write | \$0 in the | space. Ir | nclude your no | n-filing |
| | u or your non-filing sp e space, attach a sep | | ore than one employer, co this form. | ombine the inform | nation for all e | emplo | yers for | that perso | on on the | lines below. If | you need |
| | | | | | | | For Del | otor 1 | | ebtor 2 or ling spouse | |
| 2. | | | ry, and commissions (becalculate what the month) | | . 2. | \$ | 2 | ,946.67 | \$ | N/A | |
| 3. | Estimate and list r | nonthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross In | come. Add lir | ne 2 + line 3. | | 4. | \$ | 2,94 | 16.67 | \$_ | N/A | |

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| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | Debt | or 1 | Teresa L. Smith | _ | Case r | number (<i>if known</i>) | | | |
|---|------|-------------------|--|---------|--------|----------------------------|---------------------------------------|----------|----------|
| Copy line 4 here 4. \$ 2,946.67 \$ NI/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.00 \$ NI/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ NI/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ NI/A 5d. Domestic support obligations 5f. \$ 0.00 \$ NI/A 5g. Union dues 5g. Union dues 5g. Union dues 5g. Union dues 5g. Voluntary of the deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,200.99 \$ NI/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly eli month. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent linclude allinony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Social Security 8c. Social Security 8c. Other government assistance that you requirely receive linclude cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8pecify: 8p. Pension or retirement income 8p. \$ 0.00 \$ NI/A 9p. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 1notude contributions for the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amount | | | | | For | Dobtor 1 | For Dob | tor 2 or | |
| Copy line 4 here | | | | | FOI | Deptor 1 | | | |
| 5a. Tax, Medicare, and Social Security deductions 5a. \$ 745.68 \$ N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5c. Required repayments of retirement fund loans 5c. \$ 0.00 \$ N/A 5c. Insurance 5c. \$ 0.00 \$ N/A 5c. Union dues 5c. \$ 0.00 \$ N/A 5c. Voltare deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 745.68 \$ N/A 5c. Voltare deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 745.68 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,200.99 \$ N/A 5c. List all other income regularly received: 5a. Net income from rental property and from operating a business, nerecipits, ordinary and necessary business expenses, and the total monthly not income. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income. Be. Interest and dividends 8a. \$ 0.00 \$ N/A 5c. Specify: 8b. \$ 0.00 \$ N/A 5c. Specify: 8c. \$ 0.00 \$ N/A 5c. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 \$ N/A 5c. Calculate monthly income. Add lines 8a+8b-8c+8d+8e+8f+8g+8h. 9. 0.00 \$ N/A 5c. Calculate monthly income. Add lines 8a+8b-8c+8d+8e+8f+8g+8h. 9. 0.00 \$ N/A 5c. Calculate monthly income. Specify: 8c. \$ 0.00 \$ N/A 5c. Calculate monthly income. Add lines 8a-8b-8c+8d+8e+8f+8g+8h. 9. 0.00 \$ | | Сор | y line 4 here | 4. | \$ | 2,946.67 | | • • | |
| 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. So. O.00 \$ N/A 5d. Dimonations 5d. So. O.00 \$ N/A 5d. Dimonations 5d. So. O.00 \$ N/A 5d. Dimonatic support obligations 5d. So. O.00 \$ N/A 5d. Union dues 5d. Volton dues 5d. Volto | 5. | List | all payroll deductions: | | | | | | |
| 55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5e. Insurance 5e. \$ 0.00 \$ N/A 5f. Dimestic support obligations 5f. Sp. \$ 0.00 \$ N/A 5g. Union dues 5g. Union dues 5g. \$ 0.00 \$ N/A 5g. Union dues 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 5h. Other income regularly received: 8a. Note income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. \$ 0.00 \$ N/A 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive recuited alliency, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps, tolenefitis under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you four dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions fr | | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 745.68 | \$ | N/A | |
| 55. Required repayments of retirement fund loans 56. Insurance 57. Domestic support obligations 57. Domestic support obligations 58. Union dues 59. \$ 0.00 \$ N/A 59. Union dues 59. \$ 0.00 \$ N/A 50. Other deductions. Specify: 58. \$ 0.00 \$ N/A 59. Other deductions. Specify: 58. \$ 0.00 \$ N/A 59. Other deductions. Specify: 58. \$ 0.00 \$ N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 60. \$ 745.68 \$ N/A 61. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 61. \$ 745.68 \$ N/A 62. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,200.99 \$ N/A 63. List all other income regularly received: 63. Net income from rental property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$ 0.00 \$ N/A 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8c. Social Security 8c. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps, benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8d. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps, benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8d. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8g. Pension or retirement income | | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | | \$ | | - |
| 5e. Insurance 5f. Domestic support obligations 5f. Domestic support obligations 5f. Domestic support obligations 5g. Union dues 5g. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7h. Calculate monthly income. Subtract line 6 from line 4. 8h. Subtract line from line | | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | <u>-</u> |
| 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 5g. \$ 0.00 \$ N/A 5h. \$ 0.00 | | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | - |
| 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6h. \$ 745.88 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,200.99 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 11. +\$ 0. 12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 13. Do you expect an increase or decrease within the year after you fille this form? Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | 5e. | Insurance | 5e. | · — | 0.00 | \$ | | _ |
| 5h. Other deductions. Specify: Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But an add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But an add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But and the firm of the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. But an add the payroll deductions. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. But and the firm of the payroll is the combined monthly income. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. But and the firm of the payroll is the combined monthly income. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. But all other income. Add the payroll deduction to the amount in line 11. The result is the combined monthly income. Add the anomal of the payroll is the combined monthly income. Add the anomaly of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies. But an add the amount in the last column of the year after you file this form? But applies. | | | | | · — | | \$ | N/A | |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5c+5e+5e+5e+5e+5e+5e+5e+5e+5e+5e+5e+5e+5e+ | | - | | | | | · · · · · · · · · · · · · · · · · · · | | - |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,200.99 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$ 0.00 \$ N/A 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add line 7 + line 9. 10. \$ 2,200.99 + \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,200.99 + \$ N/A \$ 2,200.99 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 that the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | · · · · · · · · · · · · · · · · · · · | _ | · — | | | | - |
| 8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 9h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not availa | | | | 6. | \$ | | · | N/A | - |
| 8a. Net income from 'ental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8f. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. Combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,200.99 | \$ | N/A | - |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it No. | 8. | | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross | | | | | | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,200. | | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | _ |
| regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | 8b. | | | \$ | 0.00 | \$ | N/A | _ |
| 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 \$N/A 8h. Other monthly income. Specify: 8h. \$0.00 \$N/A 8h. Other monthly income. Add line 7 + line 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 10. \$2,200.99 + \$N/A \$1.00 \$N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4* 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | 8c. | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. \$ 0.00 \$ | | | | | · — | | | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. Specify: 8h. S | | | | | · — | | · | | - |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 8h. Add all other income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. No. | | | • | 8e. | \$ | 0.00 | \$ | N/A | _ |
| 8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | | 81. | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | \$ | 0.00 | \$ | N/A | |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A = \$ 2,200.99 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$ 2,200.99 10. \$ 2,200.99 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,200. Combined monthly income. No. | | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | - |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 12. \$ 2,200. Combined monthly incomentally | | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | - |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | <u> </u> |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | 2 | 2,200.99 + \$ | N | /A = \$ | 2,200.99 |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | , |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\(\) \(\) \(\) \(\) \(\) Combined monthly incom \(\) \(| 11. | Incluothe Do r | ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not | depen | | • | ed in <i>Sche</i> | | 0.00 |
| 13. Do you expect an increase or decrease within the year after you file this form? ■ No. monthly incompared to the property of the property | 12. | Writ | e that amount on the Summary of Schedules and Statistical Summary of Certai | | | | . if it | 12. \$ | 2,200.99 |
| 13. Do you expect an increase or decrease within the year after you file this form? No. | | | | | | | | | |
| | 13. | Do y ■ | | ? | | | | monthly | y income |

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| Fill | in this information to identify your case: | | | | |
|------------|---|----------------------------------|----------------|---|---|
| Deb | Teresa L. Smith | | | k if this is: | |
| | ouse, if filing) | | 5 , | An amended filing A supplement show 13 expenses as of t | ing postpetition chapter he following date: |
| Unit | ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | ī | MM / DD / YYYY | |
| l | se numberknown) | | | | |
| 0 | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/15 |
| info | as complete and accurate as possible. If two married people are filing toget ormation. If more space is needed, attach another sheet to this form. On the mber (if known). Answer every question. | ther, both are top of any ad | equa ditio | ally responsible for nal pages, write yo | r supplying correct our name and case |
| Par | rt 1: Describe Your Household | | | | |
| 1. | Is this a joint case? | | | | |
| | No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Separate</i> | e Household of | Debt | or 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent Debtor 1 or | t's relationship t r Debtor 2 | ю. | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| | | | | · — | □ res □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | | | | |
| Est exp | rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are using penses as of a date after the bankruptcy is filed. If this is a supplemental Sciplicable date. | | | | |
| the | clude expenses paid for with non-cash government assistance if you know evalue of such assistance and have included it on <i>Schedule I: Your Income</i> fficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. Include first m payments and any rent for the ground or lot. | | 4. \$ | | 913.96 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | 4 | a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | c. \$ | | 0.00 |
| 5. | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equity loa | | d. \$ 5. \$ | | 0.00 |

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| ebtor 1 | Teresa L. Smith | Case num | ber (if known) | |
|------------------|--|---------------|----------------|-------------------------|
| Utilitie | es: | | | |
| | Electricity, heat, natural gas | 6a. | \$ | 150.00 |
| | Water, sewer, garbage collection | 6b. | \$ | 75.00 |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 75.00 |
| | Other. Specify: | 6d. | · | 0.00 |
| | and housekeeping supplies | 7. | · | 350.00 |
| | and nousekeeping supplies are and children's education costs | 7. 8. | \$ | |
| | | | · | 0.00 |
| | ng, laundry, and dry cleaning | 9. | \$ | 50.00 |
| | nal care products and services | 10. | \$ | 50.00 |
| | al and dental expenses | 11. | \$ | 50.00 |
| | portation. Include gas, maintenance, bus or train fare. include car payments. | 12. | \$ | 150.00 |
| | ainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | able contributions and religious donations | 14. | | 0.00 |
| | _ | 14. | Φ | 0.00 |
| 5. Insura | ince. include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 225.00 |
| | Other insurance. Specify: | 15d. | | 0.00 |
| | Do not include taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| Specif | · · · · · · · · · · · · · · · · · · · | 16. | \$ | 0.00 |
| | ment or lease payments: | | | 0.00 |
| | Car payments for Vehicle 1 | 17a. | \$ | 379.87 |
| | Car payments for Vehicle 2 | 17b. | · | 352.61 |
| | Other. Specify: | 17c. | · | 0.00 |
| | Other. Specify: | 17d. | · | 0.00 |
| | payments of alimony, maintenance, and support that you did not report a | | Ψ | 0.00 |
| | ted from your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | payments you make to support others who do not live with you. | ,- | \$ | 0.00 |
| Specif | | 19. | | |
| | real property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Yo | ur Income. | |
| 20a. | Mortgages on other property | 20a. | | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | | 0.00 |
| . Other: | | 21. | · - | 0.00 |
| | | | .Ψ | 0.00 |
| | ate your monthly expenses | | | |
| | dd lines 4 through 21. | | \$ | 2,821.44 |
| 22b. C | opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2 | \$ | |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | | \$ | 2,821.44 |
| | | | - | _, |
| | late your monthly net income. | | _ | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 2,200.99 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,821.44 |
| 0.5 | | | | |
| | Subtract your monthly expenses from your monthly income. | 23c. | \$ | -620.45 |
| | The result is your monthly net income. | 230. | ۳ | 020.70 |
| 1 Do vo | u expect an increase or decrease in your expenses within the year after | vou file this | form? | |
| | in expect an increase of decrease in your expenses within the year after after imple, do you expect to finish paying for your car loan within the year or do you expect your car loan within the year or do you expec | | | e or decrease because o |
| | ation to the terms of your mortgage? | | , | |
| ■ No. | , , , | | | |
| | | | | |

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| Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | |
|---|------|
| Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | or |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Case number (if known) Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | or |
| Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | or |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | |
| obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to | |
| | |
| Sign Below | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | |
| ■ No | |
| ☐ Yes. Name of person Attach Bankruptcy Petition Preparer's Not | ice, |
| Declaration, and Signature (Official Form | 119) |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | |
| X /s/ Teresa L. Smith X | |
| | |

Date

Date **December 22, 2017**

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| Fill | in this inform | nation to identify you | r case: | | | |
|--------------------|---------------------------|--|--|---|---|---|
| | otor 1 | Teresa L. Smith | | | | |
| | | First Name | Middle Name | Last Name | | |
| l | otor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Cas | se number | | | | | |
| | nown) | | | | - | Check if this is an mended filing |
| Of | ficial Fo | rm 107 | | | | |
| Sta | atement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 |
| info | rmation. If m | | attach a separate sheet to | | equally responsible for sup y additional pages, write you | |
| Par | t 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | ☐ Married ■ Not mar | ried | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | _ | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>1</i> . | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. state | | | | | ity property state or territory ico, Texas, Washington and W | |
| | ■ No | | | | | |
| | ☐ Yes. Ma | ke sure you fill out Scl | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Par | t 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | u received from all jobs and a | ng a business during this yeall businesses, including partetogether, list it only once ur | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$5,000.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | Debto | or 1 | | Debtor 2 | | |
|----|--|--|---|---|--|---|---------------------|---|
| | | | | ces of income all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply | | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | dar year: December | | ages, commissions, es, tips | \$1,293.00 | ☐ Wages, commis bonuses, tips | sions, | |
| | | | ■ Op | erating a business | | ☐ Operating a bus | iness | |
| | | dar year be December | 31 2015) | ages, commissions, es, tips | \$19,339.00 | ☐ Wages, commis bonuses, tips | sions, | |
| | | | □Ор | erating a business | | ☐ Operating a bus | iness | |
| 5. | Include include and other winnings. List each s | come regard public bene If you are fil | dless of whether that fit payments; pension ing a joint case and y the gross income fron | ncome is taxable. Exa s; rental income; inter ou have income that | o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it o tely. Do not include income the | ted from lawsuits; roya nly once under Debto | alties; and r 1. | |
| | | | Debto | r 1 | | Debtor 2 | | |
| | | | Source | es of income be below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | 9 | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | dar year: December | | ions/Annuities | \$8,212.00 | | | |
| | | | Unen | nployment | \$2,078.00 | | | |
| | | | Healt Acco | h Savings unt | \$48.00 | | | |
| Pa | rt 3: List | : Certain Pa | yments You Made E | Before You Filed for | Bankruptcy | | | |
| 6. | Are eithe | Debtor 1's | or Debtor 2's debts | s primarily consume | r debts? umer debts. Consumer debts | are defined in 11 U.S | S.C. § 10 | 1(8) as "incurred by an |
| | | During the | 90 days before you f | iled for bankruptcy, di | id you pay any creditor a tota | of \$6,425* or more? | | |
| | | ☐ Yes | paid that creditor. D | | id a total of \$6,425* or more ints for domestic support oblights bankruptcy case | | | |
| | | * Subject | | | es after that for cases filed on | or after the date of ad | justment | |
| | Yes. | | | nave primarily consuilled for bankruptcy, di | umer debts. id you pay any creditor a tota | of \$600 or more? | | |
| | | □ No. | Go to line 7. | | | | | |
| | | ■ Yes | | or domestic support o | id a total of \$600 or more and bligations, such as child supp | | | |
| | Creditor' | s Name an | d Address | Dates of payme | ent Total amount | Amount you W | as this p | payment for |

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Debtor 1 Teresa L. Smith

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|-----|--|--|---|-------------------------|---|
| | Numark Credit Union 1654 Terry Dr. P.O. Box 2729 Joliet, IL 60434-2729 | Aug, Sept, Oct payments of \$379.87 each | \$1,139.61 | \$0.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| | Ally Financial Bankruptcy Department P.O. Box 130424 Saint Paul, MN 55113 | Aug, Sept and Oct payments of 345.03 each | \$1,035.09 | \$0.00 | ☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| | Chase Home Mortgage PO Box 78420 Phoenix, AZ 85062 | Aug, Sept and Oct payments of \$843.03 each | \$2,529.09 | \$0.00 | ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other |
| 7. | Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider. | artners; relatives of any ger control, or owner of 20% of | neral partners; partners partners or more of their voting | erships of which you | u are a general partner; corporations ny managing agent, including one for |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address | | rments or transfer a Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Pai | rt 4: Identify Legal Actions, Repossession | ne and Foreclosures | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number TD BANK USA | cy, were you a party in ar | | n suits, paternity a | Status of the case |
| | v. TERESA L. SMITH 17 SC 4065 | E DEDUCTION | 14 W. Jefferson Joliet, IL 60432 | n Street | ■ Pending□ On appeal□ Concluded |

7.

8.

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Case number (if known) Document Debtor 1 Teresa L. Smith

| | Case title Case number | Nature of the case | Court or agency | Status of t | he case |
|-----|--|---|--|------------------------|---------------------------|
| | SYNCHRONY BANK V. TERESA SMITH 17 SC 07201 | JUDGMENT | Circuit Court of Will Cour 14 W. Jefferson Street Joliet, IL 60432 | Pending On app Conclud | eal |
| 10. | Within 1 year before you filed for bankru Check all that apply and fill in the details be | | erty repossessed, foreclosed, q | garnished, attache | d, seized, or levied? |
| | No. Go to line 11.Yes. Fill in the information below. | | | | |
| | Creditor Name and Address | Describe the Property Explain what happened | d | Date | Value of the property |
| 11. | Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details. | ruptcy, did any creditor, inc | | tution, set off any | amounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | Date action was taken | Amount |
| Par | Within 1 year before you filed for bankru court-appointed receiver, a custodian, or No Yes **List Certain Gifts and Contribution** Within 2 years before you filed for bankre No Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and Address: | r another official? s uptcy, did you give any gifts Describe the gifts | | | |
| 14. | Within 2 years before you filed for bankr No Yes. Fill in the details for each gift or c | | s or contributions with a total v | value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | u contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? ■ No □ Yes. Fill in the details. | ptcy or since you filed for b | ankruptcy, did you lose anythi | ing because of the | ft, fire, other disaster, |
| | Describe the property you lost and how the loss occurred | Describe any insurance co Include the amount that insu insurance claims on line 33 of | rance has paid. List pending | Date of your loss | Value of property lost |

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Case number (if known) Document

Debtor 1 Teresa L. Smith

| Par | t 7: List Certain Payments or Transfers | | | | | |
|-----|--|--|-------------------------------|----------------|--|---|
| 16. | Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prep | paring a bankruptcy pe | tition? | | | erty to anyone you |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and transferred | value of any prope | rty | Date payment or transfer was made | Amount of payment |
| | Law Office of Patrick A. Meszaros 1100 West Jefferson Joliet, IL 60435 | \$700 Atty Fee - CR Fee | - \$335 Filing Fee | + \$23 | 12/20/17 | \$1,058.00 |
| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you | rs or to make payment | | | r transfer any prop | erty to anyone who |
| | No | | | | | |
| | Yes. Fill in the details. | Deceription and | value of any name | | Data naumant | A manuat of |
| | Person Who Was Paid Address | transferred | value of any prope | rty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details. | usiness or financial aff ade as security (such as | airs? the granting of a se | | | |
| | Person Who Received Transfer Address | Description and property transfer | | | any property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro | | ny property to a se | lf-settled tru | ıst or similar device | e of which you are a |
| | Yes. Fill in the details. | Decemention and | valva of the mana | | - d | Data Transfer was |
| | Name of trust | Description and | value of the prope | rty transferr | ed | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, Ins | struments, Safe Depos | it Boxes, and Stora | age Units | | |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated to the cooperative of the cooperative o | or other financial accou | ınts; certificates of | | | |
| | No | | | | | |
| | Yes. Fill in the details. | Look A digital of | Type of account | D- | to occount | l eat balance |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo | te account was sed, sold, oved, or nsferred | Last balance before closing or transfer |

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Debtor 1 Teresa L. Smith

| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | before you filed for bankruptcy, an | y safe deposit box or other depositor | ry for securities, |
|-----|---|---|---|-----------------------|
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or pl | ace other than your home within 1 | year before you filed for bankruptcy? | |
| | No | | | |
| | Yes. Fill in the details. | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| Par | 9: Identify Property You Hold or Control for | Someone Else | | |
| 23. | Do you hold or control any property that someo for someone. | ne else owns? Include any propert | y you borrowed from, are storing for, | or hold in trust |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | t 10: Give Details About Environmental Informa | ation | | |
| For | the purpose of Part 10, the following definitions | apply: | | |
| _ | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances. | r, land, soil, surface water, ground | • | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | aw, whether you now own, operate, o | r utilize it or used |
| | Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s | | waste, hazardous substance, toxic so | ubstance, |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of when | they occurred. | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | under or in violation of an environme | ntal law? |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site | Governmental unit | Environmental law, if you | Date of notice |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | know it | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| | | , | | |

Document Page 48 of 60 ase number (if known) Debtor 1 Teresa L. Smith 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Teresa L. Smith Teresa L. Smith Signature of Debtor 2 Signature of Debtor 1 Date December 22, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Doc 1

Filed 12/22/17

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| Debtor 1 | Teresa L. Smith | | | |
|-----------------------------|--------------------------|-------------------|-------------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bacase number | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| if known) | | | | ☐ Check if this is an amended filing |

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|--|--|---|
| | | |
| Creditor's Ally Financial | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. Retain the property and enter into a | ■ Yes |
| Description of 2016 Ford Focus 28000 miles | Reaffirmation Agreement. | _ 100 |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's Chase Home Mortgage | ☐ Surrender the property. | П № |
| name: | Retain the property and redeem it. | LI NO |
| Description of 807 B4 Horseshoe Drive Joliet, | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property IL 60435 Will County Duplex Value based on | ☐ Retain the property and [explain]: | |
| Securing debt: Duplex value based on Comparable Sale pending | | |
| Creditor's NuMark Credit Union | | п., |
| name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of 2011 Chevy HHR 110000 miles | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property | Retain the property and [explain]: | |
| | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Teresa L. Smith | Case number (if known) |
|--|--|
| securing debt: | |
| Part 2: List Your Unexpired Personal Property Leases | |
| For any unexpired personal property lease that you listed in Schedule G: Ex in the information below. Do not list real estate leases. Unexpired leases are You may assume an unexpired personal property lease if the trustee does not be a second property lease. | e leases that are still in effect; the lease period has not yet ended. |
| Describe your unexpired personal property leases | Will the lease be assumed? |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention about a property that is subject to an unexpired lease. | any property of my estate that secures a debt and any personal |
| | |
| Teresa L. Smith Signature of Debtor 1 | Signature of Debtor 2 |
| Date December 22, 2017 Date | · |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-37935 Doc 1 Filed 12/22/17 Entered 12/22/17 14:39:34 Desc Main Document Page 55 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services. I have agreed to accept Prior to the filing of this statement I have received Balance Due S 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The vertex of the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have not agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; Dereparation and filing of any petition, schedules, statement of affairs and plan which may be required; C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 Date Patrick A. Meszaros 1100 W. Jefferson Jollet, IL 60435 | In re | e Teresa L. Smith | | Case No. | | |
|--|-------|---|----------------------------------|------------------------|------------------------------------|--|
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received S 700.00 Balance Due S 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Lecrify that the foregoing is a complete statement of any agreement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 Date Patrick A. Meszaros Patrick A. Meszaros Law Office of Patrick Meszaros Joliet, IL 60435 | | | Debtor(s) | Chapter | 7 | |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received \$ 700.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The variety of the agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] EVERTIFICATION Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 Date December 22, 2017 Date All Patrick A. Meszaros Patrick A. Meszar | | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR DI | EBTOR(S) | |
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| 2. The source of the compensation paid to me was: □ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: □ Debtor □ Other (specify): 4. □ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 Date Sel Patrick A. Meszaros P | | Prior to the filing of this statement I have received | | \$ | 700.00 | |
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| 3. The source of compensation to be paid to me is: Debtor | 2. | The source of the compensation paid to me was: | | | | |
| ■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 Date Sel Patrick A. Meszaros Patrick A. Meszaros | | ■ Debtor □ Other (specify): | | | | |
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| CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 | | b. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of credito | ement of affairs and plan which | n may be required; | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 22, 2017 | 6. | By agreement with the debtor(s), the above-disclosed fee | does not include the following | g service: | | |
| this bankruptcy proceeding. December 22, 2017 | | | CERTIFICATION | | | |
| Patrick A. Meszaros 6239538 Signature of Attorney Law Office of Patrick Meszaros 1100 W. Jefferson Joliet, IL 60435 | | | agreement or arrangement for | payment to me for i | representation of the debtor(s) in | |
| Signature of Attorney Law Office of Patrick Meszaros 1100 W. Jefferson Joliet, IL 60435 | | December 22, 2017 | /s/ Patrick A. Mes | szaros | | |
| Law Office of Patrick Meszaros 1100 W. Jefferson Joliet, IL 60435 | 1 | Date | | | | |
| Joliet, IL 60435 | | | e s | • | | |
| | | | 1100 W. Jefferso | | | |
| | | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Teresa L. Smith | | Case No. | |
|-------|--|---|--------------------------|----------------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 43 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | itors is true and correc | et to the best of my |
| Date: | December 22, 2017 | /s/ Teresa L. Smith Teresa L. Smith Signature of Debtor | | |

Ally Financial Bankruptcy Department P.O. Box 130424 Saint Paul, MN 55113

Americollect Inc 1851 S Alverno Road Manitowoc, WI 54221

Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Bby/cbna Po Box 6497 Sioux Falls, SD 57117

Blitt & Gaines, P.C. Attorney for Plaintiff 661 Glenn Avenue Wheeling, IL 60090

Cap1/hlzbg 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital Management Services, LP 698 1/2 South Ogden St. Buffalo, NY 14206-2317

Capital One Po Box 26625 Richmond, VA 23261

Capital One 15000 Capital One Dr Richmond, VA 23238

Chase Home Mortgage PO Box 78420 Phoenix, AZ 85062

Citi Po Box 6241 Sioux Falls, SD 57117 Client Services, Inc PO Box 1503 Saint Peters, MO 63376-0027

Collection Bureau Of A 25954 Eden Landing Road Hayward, CA 94541

Comenity Bank - All Bk Notices Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/torrid Po Box 182789 Columbus, OH 43218

Comenitybk/victoriasec Po Box 182789 Columbus, OH 43218

Credit Control, LLC PO Box 488 5757 Phantom Dr., Ste. 330 Hazelwood, MO 63042

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Dr. R.K. Natesh 1100 Essington Rd, Suite 6 Joliet, IL 60435

Dsnb Macys Po Box 8218 Mason, OH 45040

Dupage Medical Group 15921 Collections Center Drive Chicago, IL 60693

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256 ERC
PO Box 23870
Jacksonville, FL 32241-3870

Global Credit & Collection 5440 N Cumberland Avenue Ste 300 Chicago, IL 60656

Kohl's Collection Department P.O. Box 3084 Milwaukee, WI 53201

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Merchants Credit Guide 223 W Jackson Blvd Ste 7 Chicago, IL 60606

Meridian Medical Associates, SC Joliet Medical Building 2100 Glenwood Ave. Joliet, IL 60435

Meyer & Njus, P.A. 33 N Dearborn Street Ste 1301 Chicago, IL 60602

Monterey Collection Sv 4095 Avenida De La Playa Oceanside, CA 92056

Monterey Financial Svc 4095 Avenida De La Plata Oceanside, CA 92056

NuMark Credit Union 2380 Caton Farm Road Crest Hill, IL 60403 Prosper 221 Main St. Suite 300 San Francisco, CA 94105

Provena St. Joseph Medical Center 333 N. Madison St. Joliet, IL 60435

Sam Club P.O. Box 981400 El Paso, TX 79998

Syncb/jcp Po Box 965007 Orlando, FL 32896

Syncb/sams Club Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 El Paso, TX 79998

SYNCHRONY Bank
ALL Bankruptcy Notices
PO Box 965061
Orlando, FL 32896-5061

SYNCHRONY Bank - ALL BANKRUPTCY Attn: Bankruptcy PO Box 965061 Orlando, FL 32896-5061

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Torrid P.O. Box 659584 San Antonio, TX 78265-9584

WalMart PO Box 530927 Atlanta, GA 30353